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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAY 10 PM 1:43

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Bank of America Tower
50 North Laura Street, Suite 2600
Jacksonville, Florida 32202
Tel: 904 598-6100
Fax: 904 598-6300
www.sgrlaw.com

SMITH, GAMBRELL & RUSSELL, LLP
Attorneys at Law

Pamela M. Brown
Direct Tel: 904-598-6136
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PBrown@sgrlaw.com

May 9, 2011

U.S. Mail

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

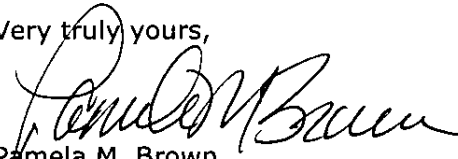
Re: John Carlo - North Main Street Property

Ladies and Gentlemen:

Enclosed is our firm's check in the amount of \$125.00 representing the filing fee for Duval-Main, LLC.

Please do not hesitate to contact me should you have any questions or comments.

Very truly yours,


Pamela M. Brown

PMB/tdb
Enclosure

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Duval-Main, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard M. Delonis

Name of Person

Steven A. Wright, P.C.

Firm/Company

13854 Simone Drive

Address

Shelby Township, MI 48315

City/State and Zip Code

rick@sawpc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard Delonis

Name of Person

at (586) 532-8560

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Duval-Main, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

14165 Main Street

Jacksonville, FL 32218

Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Pamela M. Brown

Name

Smith, Gambrell & Russell, LLP

50 N. Laura St., Ste. 2600

Florida street address (P.O. Box **NOT** acceptable)

Jacksonville FL 32202

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Jack Robson
45000 River Ridge Dr Ste 200
Clinton Twp., MI 48038

MGRM

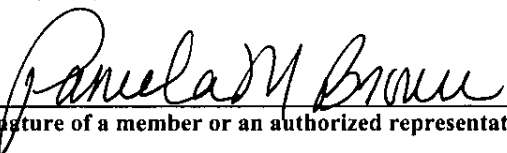
Michael Catenacci
45000 River Ridge Dr Ste 200
Clinton Twp., MI 48038

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Pamela M. Brown

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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